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## BIB DATA SHEET

CONFIRMATION NO. 7591

<b>SERIAL NUMBER</b> 09/396,539	<b>FILING or 371(c) DATE</b> 09/14/1999 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1636	<b>ATTORNEY DOCKET NO.</b> NS104D1
<b>APPLICANTS</b> PETER PALESE, LEONIA, NJ; ADOLFO GARCIA-SASTRE, NEW YORK, NY; <i>add: Mark Krystal</i> <i>Jeffrey Parvin</i>				
<b>** CONTINUING DATA *****</b> This application is a CON of 09/106,377 06/29/1998 PAT 6,001,634 which is a DIV of 08/252,508 06/01/1994 PAT 5,854,037 which is a CIP of 08/190,698 02/01/1994 ABN which is a CON of 07/925,061 08/04/1992 ABN which is a DIV of 07/527,237 05/22/1990 PAT 5,166,057				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 10/07/1999				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWINGS</b> 26	<b>TOTAL CLAIMS</b> 34
<b>INDEPENDENT CLAIMS</b> 5				
<b>ADDRESS</b> JOHNATHAN KLEIN-EVANS ONE MEDIMMUNE WAY GAITHERSBURG, MD 20878 UNITED STATES				
<b>TITLE</b> RECOMBINANT NEGATIVE STRAND RNA VIRUS EXPRESSION SYSTEMS AND VACCINES				
<b>FILING FEE RECEIVED</b> 1298	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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<b>FILING FEE RECEIVED</b> 1298	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	